

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004 8:00 am
Secretary of State

03-19-2004 90044 030 ***150.00

DOCUMENT # P01000085521

1. Entity Name
ENGINEERED PATENTS, INC.



Principal Place of Business

**15340 SW 72 AVE
MIAMI, FL 33157**

Mailing Address

**15340 SW 72 AVE
MIAMI, FL 33157**

54019871



2. Principal Place of Business

4851 SW 71 PLACE

3. Mailing Address

4851 SW 71 PLACE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

03122004

Chg-P

CR2E034 (10/03)

City & State

MIAMI FL

City & State

MIAMI FL

4. FEI Number

80-0029749

Applied For

Not Applicable

Zip

33155

Country

USA

Zip

33155

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SANCHELIMA & ASSOCIATES, P.A.
235 SW LE JEUNE RD
MIAMI, FL 33134**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. If above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☐ Delete
NAME **ENRIQUEZ, LEONARD N**
STREET ADDRESS **15340 SW 72 AVE**
CITY-ST-ZIP **MIAMI, FL 33157**

TITLE **DV** ☐ Delete
NAME **ENRIQUEZ, LEONARDO**
STREET ADDRESS **15340 SW 72 AVE**
CITY-ST-ZIP **MIAMI, FL 33157**

TITLE **DS** ☐ Delete
NAME **ENRIQUEZ, MARTHA L**
STREET ADDRESS **15340 SW 72 AVE**
CITY-ST-ZIP **MIAMI, FL 33157**

TITLE **DT** ☐ Delete
NAME **ENRIQUEZ, MARIA T**
STREET ADDRESS **5431 SW 152 PL CIR**
CITY-ST-ZIP **MIAMI, FL 33185**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☒ Change ☐ Addition
NAME **4851 SW 71 PLACE**
STREET ADDRESS **MIAMI FL 33155**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **4851 SW 71 PLACE**
STREET ADDRESS **MIAMI FL 33155**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME **4851 SW 71 PLACE**
STREET ADDRESS **MIAMI FL 33155**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **LEONARD N. ENRIQUEZ** 3/12/04 305/733-7371
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #